ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	K, M.		190 2800	
O.I.P.E. CLASSIFIER		41	7. 6. 6.	
FORMALITY REVIEW	14	1019	09.75	
RESPONSE FORMALITY REVIEW			0 1- 63.0	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
	Allowed		Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

	÷		0	Objected	
Claim	Date	Claim	Date	Claim	Date
Pinal Original		Final Original		Final Original	
1+1		51		101	
2		52		102	T + +
3		53		103	
5	 	54		104	
6	 	56	+++++	105	++++
71111	† 	57	 	106	+++++
8		58		108	
9 8 1		59		109	
10+1		60		110	
(U)	 	61		111	
13	++++	62	+ - - - -	112	
14	 	63	+++++	113	
15	+++	64	++++	114	++++
16 /	 	66	++++	115 116	
17	1 1 1 1 1 1 1	67	 	117	
18		68	1 	118	
19		69		119	+++++
20		70		120	+++++
21		71		121	
22		72		122	
23		73		123	
24		74		124	
25		75		125	
26 27		76	+	126	
28		77 78	 	127	
29	 	79	+	128	
30	 	80		129	+++++
31		81	 	130	
32		82	 	133	++++++
33		83		133 67	•
34		84		134	19/10
35	++++-	85		135	
36 37	 	86	+	136	78/2
38	╅╅╇╇┩	87		137	<u> </u>
39	╎╎╸╎╶ ┤╸┤	88	+	138	ALAN ABIE C
40	╎╎┤┤ ┤┤	90	+	139	
41	┾┼┼┼┼┤	91	+++++		+++++
42	╎╸╎╸╎╸╎ ╸┤	92		141	+++++
43	╎╸╎╸┝╸╽╸ ┤╸╽	93	++++	142	+++++
44	 	94	 	144	+++++
45	 	95		145	++++
46		96	 	146	
47		97		147	 - - - -
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims or 10 actions staple additional sheet here

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